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| TOANGMITTAL  | Filing Date   | 10/650,662                  |  |   |  |  |  |  |  |
| TRANSMITTAL  | First Named Inventor  | 29 AUG 2003                 |  |   |  |  |  |  |  |
| FORM   | Art Unit  | Joseph E. Hoot, Jr.<br>3652 |  |   |  |  |  |  |  |
|  | Examiner Name   |                             | D  |   |  |  |  |  |  |
| (to be used for all correspondence after initial fill  | ing)  | Thomas J. I                 | Branan   |   |  |  |  |  |  |
| Total Number of Pages in This Submission   | 13 Attorney Docket Number   | 84,487                      | _  |   |  |  |  |  |  |
| ENCLOSURES (Check all that apply)  |   |                             |  |   |  |  |  |  |  |
| Fee Transmittal Form Fee Attached  Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement  Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application | Drawing(s)  Licensing-related Papers  Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Terminal Disclaimer  Request for Refund  CD, Number of CD(s)  Landscape Table on C | Address                     | Appeal of App Appeal (Appeal (Appeal Status)  Status  Other below) | Enclosure(s) (please Identify                                   |  |  |  |  |  |
| Reply to Missing Parts under 37 CFR 1.52 or 1.53   |   |                             |  |   |  |  |  |  |  |
| SIGNAT   | URE OF APPLICANT, ATTO  | RNEY, O                     | R AGENT  |   |  |  |  |  |  |
| Firm Name NSWC CARDEROCK DIVI  | SION  |                             |  |   |  |  |  |  |  |
| Signature A H N  |   |                             |  |   |  |  |  |  |  |
| Printed name SCOTT R. BOALICK  | ***   |                             | -  |   |  |  |  |  |  |
| Date Janvary 19, 20  | 106   | Reg. No.                    | 42,337   |   |  |  |  |  |  |
|  |   |                             |  |   |  |  |  |  |  |
|  | RTIFICATE OF TRANSMISS  |                             |  |   |  |  |  |  |  |
| I hereby certify that this correspondence is be<br>sufficient postage as first class mail in an enve<br>the date shown below:  | elope addressed to: Commissioner for  | TO or deposior Patents, P   | ited with the Un<br>P.O. Box 1450,                                 | Ited States Postal Service with<br>Alexandria, VA 22313-1450 on |  |  |  |  |  |
| Signature  | A m   |                             |  |   |  |  |  |  |  |
| Typed or printed name SCOTT R. BOALK   | ск  |                             | Date   | January 19,2006   |  |  |  |  |  |

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case, Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (12-04v2)
Approved for use through 07/31/2008. OMB 0651-0032
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| Under the Panarwork Reduction a  |  |                            | Complete if Known          |                         |                                      |              |  |  |  |
|--|--|----------------------------|----------------------------|-------------------------|--------------------------------------|--------------|--|--|--|
| Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).  FEE TRANSMITTAL  For FY 2005  |  | Application Number         |                            |                         |                                      |              |  |  |  |
|  |  | Filing Date                | 10/650,662<br>29 AUG 2003  |                         |                                      |              |  |  |  |
|  |  | <u> </u>                   | First Named Inventor       | Joseph E. I             |                                      |              |  |  |  |
|  |  | Examiner Name              | Thomas J. Brahan           |                         |                                      |              |  |  |  |
| Applicant claims small entity status. See 37 CFR 1.27  |  | Art Unit                   | 3652                       |                         |                                      |              |  |  |  |
|  |  | Attorney Docket No.        | 84,487                     |                         |                                      |              |  |  |  |
| TOTAL AMOUNT OF PAYMENT (\$) Attorney Docket No.   84,487  |  |                            |                            |                         |                                      |              |  |  |  |
| METHOD OF PAYMENT (check all that apply)   |  |                            |                            |                         |                                      |              |  |  |  |
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| FEE CALCULATION  |  |                            |                            |                         |                                      |              |  |  |  |
| 1. BASIC FILING, SEARC   | CH, AND E<br>FILING F                  | XAMINATION FEES            | RCH FEES EX                | MINATION                | FEES                                 |              |  |  |  |
|  | Sr                                     | mall Entity                | Small Entity               | Small E                 | ntity                                | es Paid (\$) |  |  |  |
| Application Type   | Fee (\$)                               | Fee (\$) Fee               | -                          | 9e (\$) Fee (<br>00 100 |                                      | 0            |  |  |  |
| Utility  | 300                                    | 150 500                    |                            | 30 65                   |                                      | 0            |  |  |  |
| Design   | 200                                    | 100 100                    |                            | - ·                     |                                      | 0            |  |  |  |
| Plant  | 200                                    | 100 300                    | , 150                      |                         |                                      | 0            |  |  |  |
| Reissue  | 300                                    | 150 500                    | 230                        | 00 300                  |                                      | 0            |  |  |  |
| Provisional  | 200                                    | 100                        | 0                          | 0 (                     | -                                    |              |  |  |  |
| 2. EXCESS CLAIM FEE  | 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) |                            |                            |                         |                                      |              |  |  |  |
| Fee Description Each claim over 20 (in   | cluding Re                             | eissues)                   |                            |                         | 50 25                                |              |  |  |  |
| Each independent clair   | m over 3 (i                            | including Reissues)        |                            |                         | 200 100<br>360 180                   |              |  |  |  |
| Multiple dependent cla   | aims                                   | _                          | res Beld (0)               |                         | 360 180<br>Multiple Dependent Claims |              |  |  |  |
| TOTAL CITATION   | Extra Claim                            | ns <u>Fee(\$)</u>          | Gee Pald (\$)              |                         |                                      | e Pald (\$)  |  |  |  |
| 0 - 20 or HP =<br>HP = highest number of total   | 0<br>claims paid fo                    |                            | ·                          |                         | 0                                    | 0            |  |  |  |
| Indep. Claims  | Extra Clain                            | ns <u>Fee(\$)</u> <u>F</u> | ee Pald (\$)<br>O          | _                       |                                      |              |  |  |  |
| O - 3 or HP = O x O = O  HP = highest number of independent claims paid for, if greater than 3.  |  |                            |                            |                         |                                      |              |  |  |  |
|  |  |                            |                            |                         |                                      |              |  |  |  |
| 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50  |  |                            |                            |                         |                                      |              |  |  |  |
|  |  |                            |                            |                         |                                      |              |  |  |  |
| Total Sheets Extra Sheets Number of each additional to a whole number of   |  |                            |                            |                         |                                      |              |  |  |  |
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| 4. OTHER FEE(S)  Non-English Specification, \$130 fee (no small entity discount)   |  |                            |                            |                         |                                      |              |  |  |  |
| Other (e.g., late filing surcharge): Request for Continued Examination (RCE) 790.00  |  |                            |                            |                         |                                      |              |  |  |  |
| Other (e.g., rate time suronange) recognist against a survival against the survival against t |  |                            |                            |                         |                                      |              |  |  |  |
| SUBMITTED BY   |  |                            | Registration No.           | 0.078                   | Telephone 3                          | 01-227-1835  |  |  |  |
| Signature  | -6-                                    |                            | (Attorney/Agent) 2         | 9,378                   |                                      |              |  |  |  |
| Name (Print/Type) John Forre   | ast                                    |                            |                            |                         | Date / /                             | 9/06         |  |  |  |

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